Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).				Complete if Known				
FEE TRANSMITTAL				Application Number 10/538,5		45		
				Filing Date 12/4/2003				
For FY 2009				First Named Inventor Marcel Hermanus Johannes Re			nannes Rensen	
Applicant claims small entity status. See 37 CFR 1.27				Examiner Name		Alie		
TOTAL AMOUNT OF DAVAMENT				Art Unit 3724				
TOTAL AMOUNT OF PAYMENT (\$) 1,300.00				Attorney Docket 3135 - 051782				
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order Other (please identify):								
Deposit Account Deposit Account Number: 23-0650 Deposit Account Name: The Webb Law Firm								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)								
Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.								
FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.)								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
	FILING FEES SEAR							
Application Type	Fee (\$) Fee	Entity See (\$)	Small Entity Fee (\$)	Fee (\$)	mall Entity Fee (\$)	I	Fees Paid (\$)	
Utility		2 540	270	220	110	-		
Design	220 1	10 100	50	140	70			
Plant	220 1	10 330	165	170	85			
Reissue	330 10	55 540	270	650	325			
Provisional	220 1	10 0	0	0	0			
2. EXCESS CLAIM FEES Small En								
Fee Description						Fee	<del></del>	
Each claim over 20 (including Reissues) 52							-	
Each independent claim over 3 (including Reissues)  Multiple dependent claims  390 195								
Multiple dependent clain  Total Claims - 20		xtra Clai <u>ms</u> F	ee (\$)	Fee Paid (\$)			ple Dependent Claims	
-	=	x	=	10014444			(\$) Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.								
Indep. Claims - 3	or HP E	xtra Claims <u>I</u>	Fee (\$)	Fee Paid (\$)		•		
	=		=					
HP = highest number of independent claims paid for, if greater than 3.  3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under								
37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
- 100 = /50 = (round <b>up</b> to a whole number) <b>x</b> =								
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)  Other (e.g., late filing surcharge): RCE (\$810); Two-month Extension (\$490)  1300								
SUBMITTED BY			R/	egistration No.				
Signature				ttorney/Agent)	34,219	Telephone	412-471-8815	
Name (Print/Type) John W. McIlvaine Date January 25, 2010								